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Bib Data Sheet

CONFIRMATION NO. 9283

SERIAL NUMBER 09/868,411	FILING DATE 06/14/2001 RULE	CLASS 424	GROUP ART UNIT 1636	ATTORNEY DOCKET NO. 23254.05
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** CONTINUING DATA *****

This application is a 371 of PCT/US00/08353 03/30/2000
 which claims benefit of 60/126,800 03/30/1999
 which claims benefit of 60/138,379 06/09/1999

** FOREIGN APPLICATIONS *****

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 2	TOTAL CLAIMS 102	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged Allowance Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

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TITLE

Intramyocardial injection of autologous bone marrow

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)

1213		<input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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